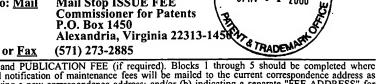




Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

	****							
CURRENT CORRESPONDENCE  22850 7			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
CT	JSTOMER	NUMBER			I hereby certify States Postal Se addressed to th transmitted to th	Certi that this ervice wi he Mail he USPT	fficate of Mailing or Tran 5 Fee(s) Transmittal is bein th sufficient postage for fi Stop ISSUE FEE address O (571) 273-2885, on the	smission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.
	2205	$\cap$						(Depositor's name)
	2285	U						(Signature)
~	•	· · · · · · · · · · · · · · · · · · ·						(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/780,640	02/19/2004			Taro Aoki			249160US0X	1883
TITLE OF INVENTION: H	HYPERLIPEMIA THERA	PEUTIC AGENT						
\5000 WBEAENES 00000	059 10780640							
1001 APPLN. TYPE	SMALL ENHITY OD	ISSUE FI	EE	PUBLICATION FEE		E	TOTAL FEE(S) DUE	DATE DUE
: 1501 : 8001nonprovisional	NO.00 OP	\$1400	\$1400		\$300		\$1700	01/31/2006
EXAMINER A		ART UN	TIT CLASS-SUBCLASS			s		
HENLEY III, RAYMOND J		1614	4 514-311000					
1. Change of correspondence CFR 1.363).			-	_	the patent front pup to 3 registere		, UD	LON, SPIVAK,
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,  (2) the name of a single firm (having as a member a  2  MCCLELLAND, MAIER					
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  & NEUSTADT, P.C.							
	D RESIDENCE DATA TO							
PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified in 37 CFR 3.11. Completion	below, no assignee on of this form is NO	data will app Γa substitute	ear on to	the patent. If an g an assignment.	n assigne i.	e is identified below, the	document has been filed for
(A) NAME OF ASSIGN	) RESIDENC	RESIDENCE: (CITY and STATE OR COUNTRY)						
1) KOWA CO.,		1) Nagoya-shi, JAPAN						
2) Nissan Chemical Industries, Ltd. 2) Tokyo, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity Government								
4a. The following fee(s) are			. Payment of		- Individual		portation of other private g	- Company - Community
Issue Fee	☐ A check in the amount of the fee(s) is enclosed.							
Publication Fee (No	Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # o	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number							
5. Change in Entity Statu	•		D					SER 1.07( )(2)
• • •	SMALL ENTITY status. S						L ENTITY status. See 37 (	
NOTE: The Issue Fee and I	Is requested to apply the Publication Fee (if required cords of the United States I	i) will not be accepted	i from anyon	e other t	han the applican	reviously it; a regis	paid issue fee to the applic tered attorney or agent; or	the assignee or other party in
Authorized Signature	boogh Sea	Latte fr.			Date	;	JAN 0 4 2	006
Typed or printed name		_	Regis	istration N	No. Reg. No. 26	,803		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

01/05